

Volunteer Opportunities

Organization: _____

Contact: _____

Address: _____

Phone: _____

Email: _____

Organization Mission and Purpose:

Describe Your Volunteer Opportunities:

Volunteer Requirements (training, specific skills, physical requirements, etc.):

Hours available for volunteers to help:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

___ a.m. to ___ p.m.

What is your **greatest** need at this time?

Are there current projects needing volunteer commitments? Describe:

Will you agree to sign a completed volunteer time sheet when members volunteer at your organization? _____ yes _____ no